

# EDUCATION REIMBURSEMENT

Directive: **6.62**

## PURPOSE:

It is the intent of the City of Wilmington to encourage and assist employees with self-development and continuing education. Therefore, the City will provide financial assistance to employees in allocated positions for approved college courses and approved certification training programs not reimbursable by their department which will improve professional and job-related knowledge and skills. The purpose of this policy is to establish eligibility parameters, approval, and administrative procedures for handling employee requests for college education reimbursements.

## POLICY:

The Education Reimbursement Policy shall have an effective date of July 1, 2001, and shall apply to all City of Wilmington employees in allocated City positions who have completed one (1) year of service.

### Program Eligibility Criteria

All City of Wilmington employees in allocated City positions who have completed one (1) year of service are eligible to participate in the Education Reimbursement Program subject to the following conditions:

#### A. For College Courses:

1. The course is for credit and offered by  
an  
accredited college or university.
2. The course is related to the employee's  
current position or other positions on  
the  
City of Wilmington's Position  
Allocations  
List (the course can be in the  
humanities or

it can be a prerequisite for completing  
a  
degree program which is related to the  
employee's current position or a City  
of  
Wilmington career opportunity).

3. The employee has a satisfactory  
performance  
evaluation at the time of the request  
and  
reimbursement.
4. Prior approval has been granted by the  
department head and the Director of  
Personnel.
5. Funds are available in the Education  
Reimbursement budget.

B. For Certification Training Programs:

1. The certification training program is  
not  
reimbursable by the department in which  
the  
employee works.
2. The certification training program is  
related  
to the employee's current position or  
other  
positions on the City of Wilmington's  
Position Allocations List program.
3. The employee has a satisfactory  
performance  
evaluation at the time of the request  
and the  
reimbursement.
4. Prior approval has been granted by the  
department head and the Director of  
Personnel.
5. Funds are available in the Education  
Reimbursement budget.

## Reimbursement

The reimbursement limit, per employee during a fiscal year, shall be established by the Administrative Board. This limit will be announced annually on or before June 30 for the upcoming fiscal year. Reimbursement will be limited to the cost of tuition paid to the college or university and the cost of each class or certificate program for a certification training program. Reimbursement will not be made for books, travel, parking, penalties, other fees, or associated graduation costs.

An employee who leaves the employment of the City of Wilmington voluntarily or involuntarily within eighteen (18) months after the date of receiving a payment through this program shall repay the full amount of the education reimbursement. An agreement will be signed by the employee authorizing the City of Wilmington to deduct any tuition refund given during the prior year from the final pay due to the employee.

## Application Procedures

### Step I

The employee must complete and submit an Education Reimbursement Application form to his/her supervisor detailing the course title, description, and its applicability to his/her current position or City of Wilmington career interests. The supervisor will forward the application to the department head for approval. All applications will be forwarded from the department head to the Director of Personnel for final review and approval. Applications must be submitted and approved prior to the start date of the course.

Within sixty (60) days after completion of an approved course or certification class/program, the employee shall submit an Education Reimbursement Request to the Personnel Department. The amount of the refund will be based on the fiscal year limit for the year in which the Education Reimbursement Application was approved. This request should include:

1. The Education Reimbursement Request prescribed by the Personnel Department.
2. Evidence of successful completion of the approved course. This evidence can be a college transcript or a course completion slip. In colleges and universities with a grading system, the grade of "C" for undergraduate courses and "B" for graduate courses must be achieved.

Evidence of successful completion of the certification class/program. This evidence can be a class completion slip stating that the class as "Passed."

3. Confirmation that all financial obligations have been handled (i.e., a paid invoice or letter from the college, university, or training facility).

Because this program was budgeted to begin in Fiscal Year 2000, an exception to the "prior approval" requirement will be granted for courses taken from July 1, 1999 through December 31, 1999. Application for this retroactive reimbursement must be approved by the department head and submitted to the Office of the Director of Personnel by January 7, 2000. Each package should include the Tuition Refund Application and the Tuition Refund Request Form. These applications will be given priority consideration.

**City of Wilmington**  
**Application for Education Reimbursement**  
**(Step 1)**

Employee: \_\_\_\_\_ Employment Date: \_\_\_\_\_

Department: \_\_\_\_\_ Extension: \_\_\_\_\_ Position: \_\_\_\_\_

**Education and Course Information**

Facility Name: \_\_\_\_\_

Facility Address: \_\_\_\_\_

Course or Certification Title: \_\_\_\_\_

Cost of Course or Certification: \_\_\_\_\_

Semester Begins: \_\_\_\_\_ Semester Ends: \_\_\_\_\_

**Course or Certification Relevance:** Please complete all sections below that apply. At least one (1) section must be completed for your application to be processed.

A. Current Position: \_\_\_\_\_

B. City Career Opportunity:

C. Degree Program Related to Current Position or City Career Opportunity:

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**I have read the Education Reimbursement a Policy and I fully understand its requirements.**

\_\_\_\_\_  
**Employee's Signature**

\_\_\_\_\_  
**Date**

**City of Wilmington**  
**Application for Education Reimbursement**  
**(Step 1)**

**(continuation)**

**APPROVALS:**

G Approve

G Disapprove

Explain: \_\_\_\_\_

\_\_\_\_\_  
**Department Head**

\_\_\_\_\_  
**Date**

(Forward to Director of Personnel)

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**(FOR PERSONNEL USE ONLY)**

Date of Last Performance Evaluation:

Performance Evaluation Status:      G Satisfactory      G Unsatisfactory

G Approve

G Disapprove

Explain: \_\_\_\_\_

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Director of Personnel

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Date

**City of Wilmington**  
**Reimbursement Request Form**  
**Education Reimbursement**  
**(Step 2)**

Employee: \_\_\_\_\_ Employment Date: \_\_\_\_

Department: \_\_\_\_\_ Extension: \_\_\_\_\_ Position: \_\_\_\_\_

**Education and Course Information**

Facility Name: \_\_\_\_\_

Facility Address: \_\_\_\_\_

Contact Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Course or Certification Title: \_\_\_\_\_

Semester Begins: \_\_\_\_\_ Semester Ends: \_\_\_\_\_

Course Grade or Certification Completion Slip (attach grade slip or transcript): \_\_\_\_\_

Course Grade or Certification Completion (attach receipt for paid bill): \_\_\_\_\_

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**I understand that if I leave employment with the City of Wilmington voluntarily or involuntarily within one year after the completion of this course, I must repay the full amount of this reimbursement. The City of Wilmington reserves the rights to deduct this amount from my final pay and to take other appropriate legal action in order to obtain reimbursement.**

\_\_\_\_\_  
**Employee's Signature**

\_\_\_\_\_  
**Date**

**City of Wilmington**  
**Reimbursement Request Form**  
**Education Reimbursement**  
**(Step 2)**  
  
**(continuation)**

**APPROVALS:** \_\_\_\_\_

\_\_\_\_\_  
Department Head

\_\_\_\_\_  
Date

(Forward to Director of Personnel)

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**(FOR PERSONNEL USE ONLY)**

Documentation Submitted:

☐ Evidence of Successful Completion of Course or Certification Program

☐ Confirmation of Financial Obligations Completed

☐ Approve

☐ Disapprove      Explain: \_\_\_\_\_



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Director of Personnel

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Date